

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF NEW YORK
UNITED STATES OF AMERICA

Time Arrived: _____
Time Leave: _____

INTERPRETER VOUCHER

VS.

Case No. _____

I request payment for interpreter services performed in U.S. District Court on behalf of the above-named defendant .

NATURE OF PROCEEDINGS	RATE
Date: _____	Time spent: _____
Language: _____	Certified: _____ Non-Certified _____
Proceeding: _____	Rate: \$ _____ (refer to Fee Schedule below)
Judge: _____	Mileage: Round-trip miles _____ at .405 per mile \$ _____
City: _____	Parking: \$ _____
	TOTAL AMOUNT DUE: \$ _____

I certify under penalty of perjury that the above is true and correct.

NAME: _____ DATE: _____
(please print clearly):

SOCIAL SECURITY NO.: _____ PHONE: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

FEE SCHEDULE

CERTIFIED:	NON-CERTIFIED:
Full Day = \$329.00	Full Day = \$156.00
Half Day = \$178.00	Half Day = \$ 86.00
Overtime* = \$ 49.00 / hour	Overtime* = \$ 27.00 / hour

Interpreters are paid by the half-day or full-day regardless of the number of events or the number of different court units to which the interpreter may be assigned during that period. Interpreters are prohibited from charging different court units for any half-day or full-day for which he or she is already receiving payment from another court unit.

* Overtime payments are payable only for time worked in excess of eight hours in one day, and overtime payments are not applicable to travel time.

For Court Use Only:

Approved By: _____ Date: _____

_____ The amount requested above exceeds the fee schedule, and the signed authorization form from the Administrative Office is attached to this voucher.

Send this approved voucher to Penny Price in Syracuse